# Case 16-20253-JAD Doc 47 Filed 08/31/16 Entered 08/31/16 11:00:58 Desc Main Document Page 1 of 8 IN THE UNITED STATES BANKRUPTCY COURT FOR THE WESTERN DISTRICT OF PENNSYLVANIA

In Re:	: Case No. 16-20253 JAD
Jeffrey L. Thomas and Elisa M. Liberatore-Thomas,	: Chapter 13
	: Document No.
Debtors,	:
Jeffrey L. Thomas and Elisa M. Liberatore-Thomas,	: : :
Movants,	: :
VS.	:
No Respondents.	: :
AMENDME	ENT COVER SHEET
Amendment(s) to the following petition, herewith:	list(s), schedule(s), or statement(s) are transmitted
Voluntary Petition Specify reason for	r amendment:
Official Form 6 Schedules (Itemizati Summary of Schedules Schedule A/B - Property Schedule C - Property Claimed as Ex Schedule D - Creditors Holding Secu Check one:  Creditor(s) add No creditor(s) delayed.	xempt ared Claims ded (Submit electronically w/amendment) added
Schedule E/F - Creditors Holding Ur	nsecured Claims
No creditor(s) Creditor(s) del	leted
Schedule G - Executory Contracts an Check one:	nd Unexpired Leases
Schedule H - Codebtors	
<ul><li>X Schedule I - Current Income of Indiv</li><li>X Schedule J - Current Expenditures of</li></ul>	
X Schedule J - Current Expenditures of Statement of Financial Affairs	f Individual Debtor(s)
Chapter 7 Individual Debtor's Staten	nent of Intentions

Chapter 11 List of Equity Security Holders

Case	16-20253-JAD	Doc 47	Filed 08/31/16	Entered 08/31/16 11:00:58	Desc Mair
			Document Pa	age 2 of 8	
	Chapter 11 List	of Credito	rs Holding 20 Larg	gest Unsecured Claims	
	Disclosure of C	ompensati	on of Attorney for	Debtor(s)	
	Other:	-	•		

#### NOTICE OF AMENDMENT(S) TO AFFECTED PARTIES

Pursuant to Fed.R.Bankr.P. 1009(a) and Local Rule 1009-1, I certify that notice of the filing of the amendment(s) checked above has been given this date to the U.S. Trustee, the trustee in this case, and to entities affected by the amendment(s) as follows: Clerks Mailing Matrix

Date: August 31, 2016

#### /s/ Daniel R. White

Daniel R. White PA I.D. No. 78718 Zebley Mehalov & White, P.C. P. O. Box 2123 Uniontown, PA 15401 Email: dwhite@Zeblaw.com Attorney for Debtors (724) 439-9200

# Case 16-20253-JAD Doc 47 Filed 08/31/16 Entered 08/31/16 11:00:58 Desc Main Document Page 3 of 8

Eill	in this information to identify your c	200:								
	otor 1 Jeffrey L. Th									
		eratore-Thomas				_				
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRIC	Γ OF PEN	INSYLVANIA		_				
Cas	se number 16-20253 JAD						Check if this is	:		
(If kn	lown)		-				An amende	ed filing		
							A supplem 13 income	ent show as of th	wing postpetition e following date:	chapter
$O_1$	fficial Form 106I						MM / DD/ \	YYYY		
So	chedule I: Your Inc	ome								12/15
spo	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	r spouse is not filing w	ith you, d	do not include	infori	matic	on about your spe	ouse. If	more space is I	needed,
1.	Fill in your employment information.		Debto	r 1			Debtor 2	2 or noi	n-filing spouse	
	If you have more than one job,	Employment status	✓ Employed			✓ Employed				
	attach a separate page with information about additional	p.c.yccc.	■ Not employed				■ Not employed			
	employers.	Occupation	Self E	mployed			Legal A	Assista	nnt	
	Include part-time, seasonal, or self-employed work.	Employer's name	Thom	as Constru	ction		Zebley	, Meha	lov & White, P	.c.
	Occupation may include student or homemaker, if it applies.	Employer's address		ute Road ntown, PA 1	5417		P.O. Bo Uniont		3 'A 15401	
		How long employed t	here?	2 months	5			years	<b>3</b>	
Par	t 2: Give Details About Mor	nthly Income								
spou	mate monthly income as of the duse unless you are separated.  u or your non-filing spouse have most space, attach a separate sheet to	ore than one employer, co	,	0 1		,	, ,	on on th	e lines below. If y	J
	List monthly gross were and	ry and commissions (	ofore all:	a a v mall				non-	-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,				2.	\$	0.00	\$	1,650.00	
3.	Estimate and list monthly overt	ime pay.			3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.			4.	\$	0.00	\$	1,650.00	

#### Case 16-20253-JAD Doc 47 Filed 08/31/16 Entered 08/31/16 11:00:58 Desc Main Document Page 4 of 8

5. <b>List</b> 5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. 6. <b>Add</b>	all payroll deductions:  Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans  Voluntary contributions for retirement plans  Required repayments of retirement fund loans Insurance  Domestic support obligations Union dues	4. 5a. 5b. 5c. 5d. 5e.	\$\$ \$\$	0.00 0.00 0.00		ebtor 2 or iling spouse 1,650.00	
5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. 6. Add	all payroll deductions:  Tax, Medicare, and Social Security deductions  Mandatory contributions for retirement plans  Voluntary contributions for retirement plans  Required repayments of retirement fund loans Insurance  Domestic support obligations	5a. 5b. 5c. 5d.	\$ 	0.00	\$		
5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. 6. Add	all payroll deductions:  Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5b. 5c. 5d.	\$		\$		-
5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h. 6. Add	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5b. 5c. 5d.	\$		\$		
5b. 5c. 5d. 5e. 5f. 5g. 5h. 6. Add	Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5b. 5c. 5d.	\$		Ф	250.00	
5c. 5d. 5e. 5f. 5g. 5h. 6. Add	Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations	5c. 5d.	· -		\$	250.00 0.00	=
5d. 5e. 5f. 5g. 5h. 6. Add	Required repayments of retirement fund loans Insurance Domestic support obligations	5d.		0.00	\$	0.00	
5e. 5f. 5g. 5h. 6. Add	Insurance Domestic support obligations		\$	0.00	\$	0.00	
5g. 5h. 6. <b>Add</b> 7. <b>Cal</b>		Je.	\$	0.00	\$	0.00	•
5h. 6. <b>Add</b> 7. <b>Cal</b> d	Union dues	5f.	\$	0.00	\$	0.00	
6. Add		5g.	\$	0.00	\$	0.00	,
7. Cald	Other deductions. Specify:	5h.+	\$	0.00	+ \$	0.00	-
	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	0.00	\$	250.00	_
8. List	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	1,400.00	_
8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		•		•		
O.	monthly net income.	8a.	\$	2,500.00	\$	0.00	-
8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		\$	0.00	\$	0.00	
0.1	settlement, and property settlement.	8c.	\$	0.00	\$	0.00	-
8d. 8e.	Unemployment compensation Social Security	8d. 8e.	\$	0.00	\$	0.00	
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		\$ \$	0.00		0.00	
8g.	Specify: Pension or retirement income	61. 8g.	\$ 	0.00	\$ \$	0.00	Ē
8h.	Other monthly income. Specify:	8h.+	*	0.00		0.00	
					r —	0.00	¬
9. <b>Add</b>	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,500.00	\$	0.00	)
	culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	2	<b>*,500.00</b> + <b>*</b>	1,40	0.00 = \$	3,900.00
Inclu othe	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your per friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	r depend	,	,	•	hedule J. 11. +\$	0.00
	the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					12. \$	3,900.00
13. <b>Do</b> y	you expect an increase or decrease within the year after you file this form No.	1?				Combir month!	ned y income

Fill	in this inform	nation to identify yo	our case:						
	otor 1					Ch	eck if th	vio io:	
Den	itor i	Jeffrey L. Th	iomas					nended filing	
Deb	otor 2	Elisa M. Libe	eratore-T	homas		_		ū	wing postpetition chapter
(Spo	ouse, if filing)					_			the following date:
Unit	ed States Bar	nkruptcy Court for the	: WESTE	RN DISTRICT OF PENNS	SYLVANIA		MM /	DD / YYYY	
Cas	e number	16-20253 JAD							
(If k	nown)								
O	fficial F	orm 106J							
S	chedul	e J: Your	Exper	ises					12/
Be info nur	as complete ormation. If mber (if kno	e and accurate as	s possible. eded, atta	If two married people ar ch another sheet to this					or supplying correct
Par		cribe Your House	hold						
1.	Is this a jo ☐ No. Go								
		oes Debtor 2 live	in a sonar	ata hausahald?					
		No	iii a sepai	ate nousenoid:					
	_		st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	ebtor 2.		
2.	Do you ha	ve dependents?	■ No						
	•	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			ependent's ge	Does dependent live with you?
	Do not sta	te the							□ No
	dependent								☐ Yes
									□ No
									☐ Yes ☐ No
									☐ Yes
									□ No
									☐ Yes
3.		xpenses include of people other t	han	No					
		nd your depende		Yes					
Par	t 2: Esti	mate Your Ongoi	ing Monthl	y Expenses					
Est	imate your	expenses as of yet a date after the	our bankrı	uptcy filing date unless y y is filed. If this is a supp					
the	value of su	ich assistance an		government assistance it cluded it on <i>Schedule I:</i> Y				Your exp	enses
(OI	ficial Form	1001.)						. са. охр	
4.	The rental payments	or home owners and any rent for th	ship expen e ground o	ses for your residence. In	nclude first mortgage	4.	\$		600.00
	If not inclu	uded in line 4:							
	4a. Rea	l estate taxes				4a.	\$		0.00
		perty, homeowner's				4b.			0.00
		ne maintenance, re neowner's associat				4c. 4d.			0.00
5.				our residence, such as ho	me equity loans	4u. 5.			0.00

### Case 16-20253-JAD Doc 47 Filed 08/31/16 Entered 08/31/16 11:00:58 Desc Main Document Page 6 of 8

			46 20252 IAD
Elisa M. Liberatore-Thomas	Case numb	er (if known)	16-20253 JAD
es:			
	6a.	\$	220.00
· · · · · · · · · · · · · · · · · · ·	6b.	\$	110.00
		·	225.00
			0.00
		*	250.00
		·	0.00
	_		25.00
			15.00
•			80.00
•		Ψ	00.00
	12.	\$	200.00
	13.	\$	0.00
	14.	\$	0.00
ance.		·	
of include insurance deducted from your pay or included in lines 4 or 20.			
Life insurance	15a.	\$	0.00
Health insurance	15b.	\$	160.00
Vehicle insurance	15c.	\$	100.00
Other insurance. Specify:	15d.	\$	0.00
s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
ify:	16.	\$	0.00
liment or lease payments:			
Car payments for Vehicle 1	17a.	\$	180.00
Car payments for Vehicle 2	17b.	\$	0.00
Other. Specify:	17c.	\$	0.00
Other. Specify:		\$	0.00
		•	0.00
	18.		0.00
		\$	0.00
	-	_	
			2.22
			0.00
		·	0.00
·			0.00
		·	0.00
		·	0.00
r: Specify: Pet food	21.	+\$	100.00
ulate your monthly expenses			
		\$	2,265.00
· · · · · · · · · · · · · · · · · · ·			1,085.00
			· · · · · · · · · · · · · · · · · · ·
nuu iine zza anu zzb. The result is your monthiy expenses.		Φ	3,350.00
ulate your monthly net income.	·		
Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,900.00
Copy your monthly expenses from line 22c above.	23b.	-\$	3,350.00
	١		
Subtract your monthly expenses from your monthly income.		•	EE0.00
The result is your monthly net income.	23c.	Ъ	550.00
ou expect an increase or decrease in your expenses within the year after yo	ou file this	form?	
ample, do you expect to finish paying for your car loan within the year or do you expect you			ease or decrease because of a
			ease or decrease because of a
ie legion sifili	Electricity, heat, natural gas Water, sewer, garbage collection Telephone, cell phone, Internet, satellite, and cable services Other. Specify: and housekeeping supplies care and children's education costs ing, laundry, and dry cleaning wal care products and services and and dental expenses portation. Include gas, maintenance, bus or train fare. t include car payments. tainment, clubs, recreation, newspapers, magazines, and books table contributions and religious donations ance. Health insurance Health insurance Vehicle insurance Other insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. Life insurance Other specify: Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Internet or lease payments: Car payments for Vehicle 1 Car payments for Vehicle 2 Other. Specify: Other. Specify: Dayments of alimony, maintenance, and support that you did not report as ted from your pay on line 5, Schedule I, Your Income (Official Form 106i). payments you make to support others who do not live with you.  The real property expenses not included in lines 4 or 5 of this form or on Schedingages on other property Real estate taxes Property, homeowner's, or renter's insurance Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues Specify: Pet food  late your monthly expenses did lines 4 through 21. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 did line 22a and 22b. The result is your monthly expenses.  Late your monthly net income. Copy line 12 (your combined monthly income) from Schedule I. Copy your monthly expenses from line 22c above.  Subtract your monthly expenses from your monthly income.	Electricity, heat, natural gas Water, sewer, garbage collection Cither, Specify: Gand housekeeping supplies Care and children's education costs Ing, laundry, and dry cleaning Ing, laundry, and cleaning Ing, laundry, and beep cleaning Ing, laundry, and beep cleaning Ing, laundry, and beep cleaning Ing, laundry	Electricity, heat, natural gas Electricity, heat, natural gas Water, sewer, garbage collection 6b. \$ Telephone, cell phone, Internet, satellite, and cable services 6c. \$ Other. Specify: 6d. \$ and housekeeping supplies 7. \$ acare and children's education costs ing, laundry, and dry cleaning 8 \$ ing, laundry, and dry cleaning 9 \$ ing, laundry, and dry cleaning 10 \$ ing, laundry, and dry cleaning 11 \$ ing, laundry, and dry cleaning 11 \$ ing, laundry, and dry cleaning 12 \$ ing, laundry, and dry cleaning 13 \$ ing, laundry, and dry cleaning 14 \$ ing, laundry, and dry cleaning 15 \$ ing, laundry, and dry cleaning 16 \$ ing, laundry, and dry cleaning 17 \$ ing, laundry, and dry cleaning 18 \$ ing, laundry, and dry cleaning 18 \$ ing, laundry, and dry cleaning 19 \$ ing, laundry, and dry cleaning 10 \$ ing, laundry, and dry cleaning 11 \$ ing, laundry, and dry cleaning 12 \$ ing, laundry, and dry cleaning 13 \$ ing, laundry, and dry cleaning 14 \$ ing, laundry, a

### Case 16-20253-JAD Doc 47 Filed 08/31/16 Entered 08/31/16 11:00:58 Desc Main Document Page 7 of 8

		ey L. Thomas M. Liberatore	-Thoma:	5	Cas	e number (if known)	16-20	0253 JAD	
Fill	in this informa	ation to identify yo	our case:						
Deb	tor 1	Jeffrey L. Th	omas			Check if this is:	CP		
	tor 2 ouse, if filing)	Elisa M. Libe	eratore-T	homas		An amended A supplement expenses as	showing	postpetition chapter 13 wing date:	}
Unit	ed States Bank	ruptcy Court for the	WEST	ERN DISTRICT OF PENNS	SYLVANIA	MM / DD / YY	ΥΥ		
	e number nown)	16-20253 JA	D						
Use Del forr spa	chedule this form for otor 2 have on only with r	or Debtor 2's sep one or more depo respect to expen d, attach anothe	Ir Expoarate how endents in eses for D	penses for Sepa usehold expenses ONLY I in common, list the dependebtor 2 that are not report this form. On the top of a	F Debtor 1 and Debtor dents on both Schedul ted on Schedule J. Be	2 maintain separ e <i>J and this form</i> as complete and	ate house . Answe accurate	eholds. <i>If Debtor 1 all r the questions on th</i> as possible. If more	is
Par	1: Desc	ribe Your House	ehold						
1.		I Debtor 1 maint Do not complete		ate households?					
2.	Do you hav	e dependents?	■ No						
	Do not list D list all other dependents regardless of listed as a d of Debtor 1 Schedule J.	of Debtor 2 of whether lependent on	☐ Yes.	Fill out this information for each dependent	Dependent's relationsh Debtor 2	nip to Depen	dent's	Does dependent live with you?	
	Do not state dependents							□ No □ Yes	
								□ No □ Yes	
	•							□ No □ Yes	
								□ No □ Yes	
3.	expenses of	penses include of people other t d your depende	han <sub>–</sub>	No l Yes					
	imate your e	nate Your Ongoi xpenses as of yo a date after the	our bankı	uptcy filing date unless y	ou are using this form	as a supplement	in a Cha	pter 13 case to report	ť
				government assistance in Schedule I: Your Incom		Your expe	nses		
4.		or home owners nd any rent for th		nses for your residence. In or lot.	nclude first mortgage	4. \$		300.00	
	If not include	ded in line 4:							
		estate taxes erty, homeowner's	s. or rente	r's insurance		4a. \$ 4b. \$		0.00	

# Case 16-20253-JAD Doc 47 Filed 08/31/16 Entered 08/31/16 11:00:58 Desc Main Document Page 8 of 8

Debtor 1	Jeffrey L. Thomas		16-20253 JAD
ebtor 2	Elisa M. Liberatore-Thomas	Case number (if known)	10-20233 JAD
4c.	Home maintenance, repair, and upkeep expenses	4c. \$	0.00
4d.	Homeowner's association or condominium dues	4d. \$	0.00
. Addi	tional mortgage payments for your residence, such as home equity loans	5. \$	0.00
. Utiliti	ies:		
6a.	Electricity, heat, natural gas	6a. \$	0.00
6b.	Water, sewer, garbage collection	6b. \$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	100.00
6d.	Other. Specify:	6d. \$	0.00
Food	I and housekeeping supplies	7. \$	100.00
Child	dcare and children's education costs	8. \$	0.00
Cloth	ning, laundry, and dry cleaning	9. \$	0.00
	onal care products and services	10. \$	0.00
	cal and dental expenses	11. \$	0.00
2. Trans	sportation. Include gas, maintenance, bus or train fare.	· —	
	ot include car payments.	12. \$	125.00
3. Ente	rtainment, clubs, recreation, newspapers, magazines, and books	13. \$	0.00
. Char	itable contributions and religious donations	14. \$	0.00
5. <b>Insur</b>	rance.		_
	ot include insurance deducted from your pay or included in lines 4 or 20.	^	
	Life insurance	15a. \$	0.00
	Health insurance	15b. \$	160.00
	Vehicle insurance	15c. \$	100.00
	Other insurance. Specify:	15d. \$	0.00
S. <b>Taxe</b> Spec	s. Do not include taxes deducted from your pay or included in lines 4 or 20. ify:	16. \$	0.00
	Illment or lease payments:		
	Car payments for Vehicle 1	17a. \$	200.00
	Car payments for Vehicle 2	17b. \$	0.00
	Other. Specify:	17c. \$	0.00
dedu	payments of alimony, maintenance, and support that you did not report as acted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$	0.00
	r payments you make to support others who do not live with you.	\$	0.00
Spec	•	19.	
	r real property expenses not included in lines 4 or 5 of this form or on Sche		0.00
	Mortgages on other property	20a. \$	0.00
	Real estate taxes	20b. \$	0.00
	Property, homeowner's, or renter's insurance	20c. \$	0.00
	Maintenance, repair, and upkeep expenses	20d. \$	0.00
	Homeowner's association or condominium dues	20e. \$	0.00
1. Othe	r: Specify:	21+\$	0.00
2. Your	monthly expenses. Add lines 5 through 21.	\$	1,085.00
The r	result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedu late the total expenses for Debtor 1 and Debtor 2.		-,
3. Line ı	not used on this form.		
For ex	ou expect an increase or decrease in your expenses within the year after you cample, do you expect to finish paying for your car loan within the year or do you expect your ication to the terms of your mortgage?		rease or decrease because of a
■ NZ	, 55		

No.	
-----	--

■ NO.	
☐ Yes.	Explain here: